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APPLICATION NO.		FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/705,618		11/10/2003	Lynn E. Spitler	204372000902	4690
25225	7590	08/04/2006		EXAMINER	
		DERSTER LLP	HUMPHREY, DAVID HAROLD		
12531 HIGH BLUFF DRIVE SUITE 100				ART UNIT	PAPER NUMBER
		92130-2040		1643	
				DATE MAILED: 08/04/200	6

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)			
	10/705,618	SPITLER ET AL.			
Office Action Summary	Examiner	Art Unit			
	David Humphrey	1643			
The MAILING DATE of this communication app Period for Reply					
A SHORTENED STATUTORY PERIOD FOR REPLY WHICHEVER IS LONGER, FROM THE MAILING DATE of time may be available under the provisions of 37 CFR 1.13 after SIX (6) MONTHS from the mailing date of this communication. If NO period for reply is specified above, the maximum statutory period value of the communication of the provision of	ATE OF THIS COMMUNICATION 36(a). In no event, however, may a reply be timused and will expire SIX (6) MONTHS from a cause the application to become ABANDONE	N. they filed the mailing date of this communication. D (35 U.S.C. § 133).			
Status					
1) Responsive to communication(s) filed on 25 M	Responsive to communication(s) filed on <u>25 May 2006</u> .				
2a)⊠ This action is FINAL . 2b)□ This	action is non-final.				
3) Since this application is in condition for allowance except for formal matters, prosecution as to the					
closed in accordance with the practice under E	Ex parte Quayle, 1935 C.D. 11, 45	53 O.G. 213.			
Disposition of Claims					
4) Claim(s) <u>54-74</u> is/are pending in the application 4a) Of the above claim(s) is/are withdray 5) Claim(s) is/are allowed. 6) Claim(s) <u>54-71</u> is/are rejected. 7) Claim(s) <u>72-74</u> is/are objected to. 8) Claim(s) are subject to restriction and/o	wn from consideration.				
Application Papers					
9) The specification is objected to by the Examine 10) The drawing(s) filed on is/are: a) acc Applicant may not request that any objection to the Replacement drawing sheet(s) including the correct 11) The oath or declaration is objected to by the Ex	epted or b) objected to by the I drawing(s) be held in abeyance. See ion is required if the drawing(s) is ob	e 37 CFR 1.85(a). jected to. See 37 CFR 1.121(d).			
Priority under 35 U.S.C. § 119					
12) Acknowledgment is made of a claim for foreign a) All b) Some * c) None of: 1. Certified copies of the priority document 2. Certified copies of the priority document 3. Copies of the certified copies of the priority application from the International Bureau * See the attached detailed Office action for a list	s have been received. s have been received in Applicati rity documents have been receive u (PCT Rule 17.2(a)).	ion No ed in this National Stage			
Attachment(s)					
 Notice of References Cited (PTO-892) Notice of Draftsperson's Patent Drawing Review (PTO-948) Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08) Paper No(s)/Mail Date <u>05/25/06</u>. 	4) Interview Summary Paper No(s)/Mail D 5) Notice of Informal F 6) Other:				
S. Patent and Trademark Office					

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DETAILED ACTION

Response to Amendments and Arguments

1. The Office acknowledges the receipt of Applicants' amendment to the claims in the response filed on 25 May 2006. Claims 63-74 are added.

Claims 54-74 are pending.

Claims 54, 57, and 60 are amended.

Claims 54-74 are examined on the merits.

2. The text of those sections of Title 35, U.S. Code not included in this action can be found in a prior Office action.

New Grounds of Objection

3. Claims 72, 73, and 74, are objected to for depending on rejected claims.

Maintained Rejections

Claim Rejections - 35 USC § 112, first paragraph

4. The rejection of claims 54-62 and newly added claims 63-71, under 35 U.S.C. 112, first paragraph, because the specification, while being enabling for a method of treating a subject by administration of an anticancer agent, CPT-11, and JBT3002 in multilamellar vesicles to reduce intestinal damage (intestinal mucositis) does not reasonably provide enablement for a method of treating a subject with any

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anti-neoplastic agent and JBT3002 to alleviate intestinal damage (intestinal mucositis) is maintained and made. Further, the specification is not enabling for "prevention" of mucositis.

The claims are directed to a method of alleviating or preventing intestinal mucositis in a subject associated with treatment with an anti-neoplastic agent. The claimed method requires the administration of JBT3002 (N-palmitoyl-S-[2(R,S), 3-dilauroyloxy-propyl]-(R)-cysteine) in an amount sufficient to alleviate or prevent said side effect. The claims also recite encapsulating JBT 3002 in liposomes and more specifically multilamellar liposomes.

Applicants argue that the specification is enabling for "prevention" of side effects since Example 14, on pages 60-62, states that treatment with JBT 3002 was followed by treatment with CPT-11, see Remarks, page 7, first full paragraph, lines 3-5.

Applicants further point out that in the discussion summarizing the results, it is clearly stated that the treatment of JBT 3002 followed by CPT-11 prevents disruption of the intestinal architecture as demonstrated through hematoxylin and eosin (H&E) staining of the pathology samples, see Remarks, page 7, first full paragraph, lines 5-7. Applicants also direct the Examiner to Figure 21 and page 51 which demonstrate that intestinal architecture in mice pretreated with JBT 3002 is remarkably well preserved, see Remarks, page 9, second full paragraph, lines 1-5.

With respect to oral and esophageal mucositis, Applicants submit that demonstrating reduction of intestinal mucositis is sufficient since it is well known in the art that oral mucosa, esophageal mucosa, and gastrointestinal mucosa share a

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common embryologic origin, see Remarks, page 9, third full paragraph, lines 1-3. Applicants further argue that it has been long known in the art that chemotherapeutic drugs that cause oral ulceration typically also cause gastrointestinal ulceration, citing Cadman et al. (1991), see Remarks, page 9, third full paragraph, lines 8-13. Applicants further cite Skubitz et al. (1996) who teach that therapy for oral mucositis was based on knowledge of intestinal physiology, see Remarks, page 10, lines 4-9. Applicants argue Skubitz et al. teach on page 225 that the fact that glutamine supplementation was effective for oral mucositis in addition to intestinal mucositis, strongly suggested that the two conditions share a common mechanism, see Remarks, page 10, lines 10-12.

Applicants argue that the amended claims do not claim any anti-neoplastic agent but rather those anti-neoplastic agents that result in modified IL-15 levels in a subject, see Remarks, page 8, first paragraph, lines 3 and 4. Applicants further submit that the art cited by the Examiner, Smorenburg et al., describes the use of two or more drugs used in combination for their anti-neoplastic effects in contrast to the claimed invention which discloses a method of using JBT 3002 as an agent that prevents or alleviates a specific side effect, see Remarks, page 8, second paragraph, lines 1-5. Applicants conclude that Smorenburg et al. in fact teaches that combination drug therapy is not simple, but it is routine and well-known in the art, see Remarks, page 8, last sentence bridging page 9.

Applicants' arguments have been carefully considered but found not persuasive. First of all, it is not clear from figure 22 that intestinal mucositis has been "prevented". In fact, the H&E staining of the JBT3002/CPT11 treated ileum looks more inflamed than

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does the ileum treated with CPT-11 alone. While the specification may be enabling for reducing or alleviating intestinal mucositis it is not enabled for preventing intestinal mucositis. The definition of prevent is "to keep from happening." Therefore, a higher standard is required to demonstrate that a side effect or disease, etc., has been prevented since even lessening the degree of intestinal mucositis would not be considered preventing the side effect. The specification does not provide support for claims to "preventing intestinal mucositis" as limited data is provided regarding the protective effects of JBT3002 when administered prior to CPT-11 (Example 14). Only one H&E stained mouse ileum sample is provided in Figure 22 and it is not clear from the description on page 61 how many mice were actually utilized. Therefore, due to the lack of working examples as well as the unpredictability of the art, one of ordinary skill in the art would conclude the that specification is not enabling for a method of preventing intestinal mucositis.

Contrary to Applicants' assertions, the claims recite any anti-neoplastic agent. Newly added claims 63, 66, and 69, do recite increased levels of endogenous IL-15 but that appears to be due to the effects of JBT3002 and not the anti-neoplastic agent. If the claims are amended to recite an anti-neoplastic agent that increases the level of IL-15, a rejection under 35 U.S.C. 112, first paragraph, written description, will be applied. Applicants argue that the claims do not recite any anti-neoplastic agent but those antineoplastic agents that result in elevated levels of IL-15. Applicants' arguments concerning Smorenburg et al. are noted. However, the Examiner cited the Smorenburg reference as evidence that one of ordinary skill cannot just combine any two anti-cancer

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therapies and expect a more effective treatment. Since Applicants disclose the use of only one anti-neoplastic agent, CPT-11, in combination with JBT3002 to reduce CPT-11-induced intestinal damage of C57/BL/6 mice (see Specification page 52, Example 8 and corresponding Figure 21; page 60, Example 14, and corresponding Figure 22), undue experimentation would be required to make and use the invention commensurate in scope with the claims which encompass any anti-neoplastic agent.

No examples of prevention of oral or esophageal mucositis are presented in the specification. While the Examiner concurs that oral or esophageal mucositis may have common origins as intestinal mucositis, the specification is not enabled for preventing any type of mucositis, whether intestinal, oral, or esophageal.

Therefore, one of ordinary skill in the art would conclude that utilizing the method of treating a subject with a neoplastic agent and JBT3002 to prevent mucositis would require undue experimentation in order to practice the invention as claimed by the Applicants.

Conclusion

- 5. No claim is allowed.
- 6. Applicants' amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE

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MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later

than SIX MONTHS from the mailing date of this final action.

7. Any inquiry concerning this communication or earlier communications from the examiner should be directed to David Humphrey whose telephone number is (571) 272-5544. The examiner can normally be reached on Mon-Fri 8:30AM-5PM.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Larry Helms can be reached on (571) 272-0832. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.



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David Humphrey, Ph.D.

July 28, 2006

LARRY R. HELMS, PH.D. SUPERVISORY PATENT EXAMINER